

**Application Data Sheet****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	TREATMENT WITH CYTOKINES FOR ALZHEIMER'S DISEASE
Attorney Docket Number::	62526US(50221)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	3
Small Entity?::	YES
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	IT
Status::	Full Capacity
Given Name::	Mario
Middle Name::	
Family Name::	Clerici
City of Residence::	Milano
State or Province of Residence::	
Country of Residence::	IT
Street of mailing address::	Via GB Grassi 74
City of mailing address::	20157 Milano
State or Province of mailing address::	IT

Postal or Zip Code of mailing address:: 20157

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: IT  
Status:: Full Capacity  
Given Name:: Giorgio  
Middle Name::  
Family Name:: Annoni  
City of Residence:: Milan  
State or Province of Residence::  
Country of Residence:: IT  
Street of mailing address:: Via Pace 9  
City of mailing address:: Milan  
State or Province of mailing address:: IT

Applicant Authority Type::  
Primary Citizenship Country::  
Status::  
Given Name::  
Middle Name::  
Family Name::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Postal or Zip Code of mailing address::

Applicant Authority Type::  
Primary Citizenship Country::  
Status::

**Correspondence Information**

Correspondence Customer Number:: 21874

**Representative Information**

Representative Customer Number:: 21874

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
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**Foreign Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
GB 0212648.0			May 31, 2002

**Assignee Information**

Assignee name:: ImmunoClin Limited  
Street of mailing address:: Rowlandson House  
289-293 Ballards Lane  
City of mailing address:: London N12 8NP  
State or Province of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: N12 8NP